

**Special Payment Plan (SPP) Request Form**

I hereby request a Special Payment Plan allowing individual self-payers to pay Tuition & Fees in four (4) installments with specified due dates during the academic year.

I understand that the Administrative Fee of **CZK 25 000** per student will be added to the first installment and must be paid for this Plan to come into effect. I also understand that all one-off Fees (Administrative Fee, Newcomers’ Fee and Capital Assessment Fee) will be assessed as part of the first installment of my SPP.

Finally, in requesting this SPP, I acknowledge that it does not supersede or replace any payment or other terms or conditions established in the Enrollment Agreement I have signed with the School.

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| Academic Year: |   |
| Parent‘s Name: |   |
| Parent’s Email, Telephone: |   |
| Student’s Name, Grade: |   |
| Student’s Name, Grade: |   |
| Student’s Name, Grade: |   |
| Student’s Name, Grade: |   |

Date:

Signature: